

**Washington DC
Implementation of the
Quality Indicator Survey (QIS)**

**Wash. DC Health Care Facilities Division
Centers for Medicare & Medicaid Services
Nursing Home Quality, LLC**

February 8, 2011




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Agenda

1. Welcome and Introductions – Thomas Kress, CMS
2. Background and Development of the Quality Indicator Survey (QIS) – Thomas Kress, CMS
3. National QIS Training Process – Thomas Kress, CMS
4. Description and Timing of State QIS Implementation – Sharon Lewis, Program Manager, and Sharon Mills, Supervisory Nurse Consultant Long Term Care Team, Health Care Facilities Division
5. Comparison of the QIS and Traditional Survey Process – Tracy Cooley, Master QIS Trainer, Nursing Home Quality, LLC
6. QIS Overview– Tracy Cooley, Master QIS Trainer, NHQ
7. Questions and Answers




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What is the QIS?

- Approved Federal nursing home survey process designed and developed to promote consistency, reliability and accuracy
- Uses customized software on tablet PCs to guide surveyors through a two-staged systematic review of regulatory requirements using observation, interview, and record review




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QIS Development

- Produced prototype (1998-2005)
- Demonstration and Evaluation (2005-2007)
 - Two teams each in KS, OH, CA, CT, LA
- Develop and refine national training model (2006-2007)
 - Three States: FL, CT, KS
- National implementation State-by-State to replace Traditional survey (2007-present)




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What Does the QIS Provide?

- Structured approach to promote more accurate and consistent results
- Larger and more diverse randomly selected samples to obtain a more accurate picture of the residents
- Automation to systematically review regulatory areas, synthesize surveyor findings, enhance investigative protocols, and organize surveyor documentation




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What QIS Is Not

QIS Does Not Represent:

- Change in the Social Security Act
- Change in the Regulations
- Change in Interpretive Guidance
- Change in enforcement process




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CMS Issued Guidance

- State Operations Manual, Appendix P
- Quality Indicator Survey Training Process (State Operations Manual, Chapter 4)
- QIS Brochure (S&C 08-21)
- National Implementation Priority Order (S&C 09-50)
- Admin Info: 10-21-NH/QIS




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Training Requirements for Registered QIS Surveyor

- Prerequisites
 - Proficiency with tablet PC functions and computer skills
- Completion of classroom training
- Participation in mock training survey
- Participation in 2 surveys of record with successful compliance assessment
- Documentation in CMS Learning Management System (LMS)




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Training Requirements for CMS-Certified QIS Trainer

- Be Registered QIS Surveyor
- Successfully complete additional requirements
 - Complete at least six QIS surveys of record
 - Attend Train the Trainer workshop
 - Provide the QIS classroom training
 - Monitor surveyor-students in mock survey
 - Conduct compliance assessment for surveyor-students during a survey of record
 - Remain actively involved in QIS training/surveys
- Documentation in CMS Learning Management System (LMS)




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QIS National Implementation*

Twenty-one currently participating QIS States

CT, FL, KS, MN, NM, LA, OH, NC, WV, WA, MD,
DE, ME, VT, GA, AZ, CO, NY, NE, IN, UT

*as of presentation date




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Description of State-specific Implementation Plan and Timing

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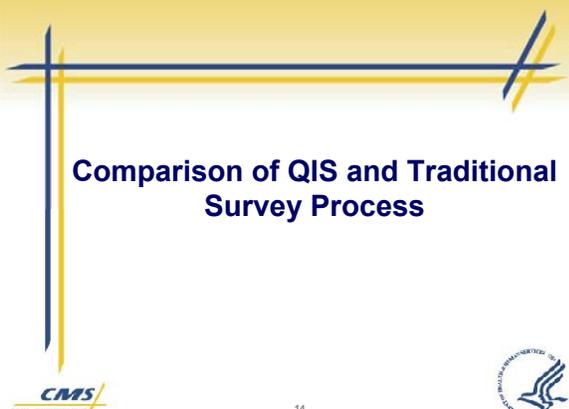


Quality Indicator Survey: Comparison with Traditional Survey and Overview

Tracy Cooley
Master QIS Trainer
Nursing Home Quality, LLC



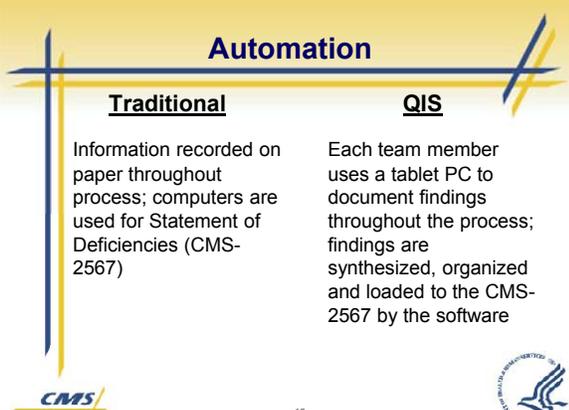

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Comparison of QIS and Traditional Survey Process




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Automation

<u>Traditional</u>	<u>QIS</u>
Information recorded on paper throughout process; computers are used for Statement of Deficiencies (CMS-2567)	Each team member uses a tablet PC to document findings throughout the process; findings are synthesized, organized and loaded to the CMS-2567 by the software




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Off-Site Preparation

<u>Traditional</u>	<u>QIS</u>
<ul style="list-style-type: none"> ➤ Review: <ul style="list-style-type: none"> ▪ OSCAR 3 and 4 Reports ▪ QM/QI Reports ▪ Results of complaint investigations ➤ Pre-select a sample based on above 	<ul style="list-style-type: none"> ➤ Review: <ul style="list-style-type: none"> ▪ OSCAR 3 Report ▪ Uninvestigated complaints ➤ Random selection of Stage 1 samples from MDS data loaded onto tablet PCs


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Onsite Preparation

<u>Traditional</u>	<u>QIS</u>
<ul style="list-style-type: none"> ➤ Roster/Sample Matrix Form CMS 802 	<ul style="list-style-type: none"> ➤ Alphabetical resident census with room numbers/units ➤ List of new admissions over the last 30 days


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Initial Tour

<u>Traditional</u>	<u>QIS</u>
<ul style="list-style-type: none"> ➤ Gather information about pre-selected residents and identify new concerns ➤ Determine whether pre-selected residents are still appropriate 	<ul style="list-style-type: none"> ➤ Brief overall impression of the facility, the residents and the staff ➤ Not intended for sample selection or supplementation


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Sample Selection

<p>Traditional</p> <ul style="list-style-type: none"> ➤ Sample size determined by facility census ➤ Residents selected based on QM/QI percentiles and issues identified offsite and on the initial tour 	<p>QIS</p> <ul style="list-style-type: none"> ➤ Stage 1 sample size: <ul style="list-style-type: none"> ▪ Admission (30) ▪ Census (40) ➤ Stage 2 sample size based on number of triggered care areas ➤ Residents selected by software ➤ Surveyor-initiated sample
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Survey Structure

<p>Traditional</p> <ul style="list-style-type: none"> ➤ Phase I: focused & comprehensive reviews ➤ Phase II: focused reviews 	<p>QIS</p> <ul style="list-style-type: none"> ➤ Stage 1: preliminary investigation ➤ Stage 2: in-depth investigation of triggered concerns from Stage 1
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QIS Process Made Easy Two Stages: Three Steps


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Two Stages of QIS

Stage 1: Preliminary investigation of regulatory areas to determine resident care areas and facility practices for Stage 2 investigation

Stage 2: In-depth investigation to determine whether deficient practice exists, document deficiencies, and determine severity and scope




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Three Steps in Each Stage

1. Sampling (computer-generated)
2. Investigation
3. Synthesis



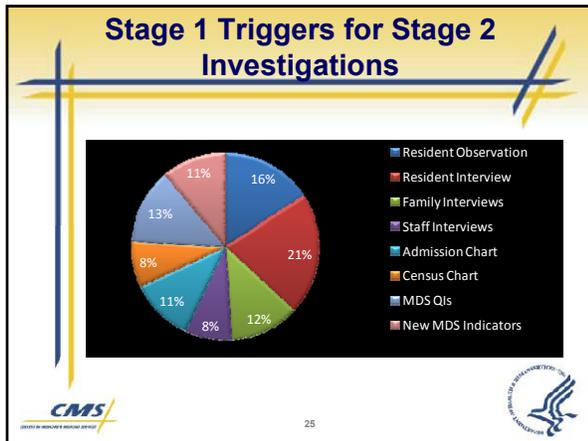

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QIS Stage 1

- **Sampling** - Random census (40) and admission (30) samples
- **Investigation** - Structured resident, family, and staff interviews; resident observations; chart reviews
- **Synthesis** - 128 resident-centered and 34 facility-level Quality of Care and Quality of Life Indicators (QCLIs) to identify care areas that exceed national thresholds




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Surveyor-Initiated Sample

Surveyors can initiate an investigation of care issues for any resident or facility task. Because of the large QIS samples, surveyor-initiated investigations are a small part of the process.

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- ### QIS Facility Tasks
- > **Completed on every survey:**
 - Dining Observation
 - Infection Control & Immunizations
 - Kitchen/Food Service Observation
 - Liability Notices & Beneficiary Appeal Rights Review
 - Medication Administration Observation
 - Medication Storage
 - Quality Assessment and Assurance Review
 - Resident Council President/Representative Interview
 - > **Completed if triggered:**
 - Abuse Prohibition Review
 - Admission, Transfer, and Discharge Review
 - Environmental Observations
 - Personal Funds
 - Sufficient Nursing Staff Review
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QIS Stage 2

- **Sampling** – Three residents per triggered Care Area plus surveyor-initiated residents (e.g., complaints)
- **Investigation** – Specific or general Critical Element pathway or facility task pathway and interpretive guidelines
- **Synthesis** – Determine compliance with each Critical Element, document noncompliance at the applicable F tags, determine severity and scope


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Additional QIS Resources

CMS QIS Satellite Broadcast
<http://surveyortraining.cms.hhs.gov/pubs/Videoinformation.aspx?cid=1082>

QIS Electronic Forms and Worksheets
<https://www.qtso.com.html>


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